

Date Received: ____ / ____ / ____

Folio # _____

Today's Date: ____ / ____ / ____



Permit # _____

Permit Name: _____

Date of Event: _____

Town of Miami Lakes

6601 Main Street
Miami Lakes, Florida 33014
Phone: 305.364.6100
www.miamilakes-fl.gov

SPECIAL EVENT PERMIT APPLICATION

Application Fee - \$100

**If application is submitted seven (7) days or less prior to the event
Application Fee - \$500**

*****Payable only by check or money order to the “Town of Miami Lakes”*****

For processing, it is recommended that your application be submitted a minimum of thirty (30) days prior to the event; however, no application will be accepted less than ten (10) days prior to the event, in accordance with Ordinance 13-159.

Thank you for selecting the Town of Miami Lakes as the site for your special event. The information requested in this application will be used to determine your eligibility for a permit to conduct your proposed event. Please note that submission of your application should in no way be construed as final approval of your request; it is considered a request for a permit only. In order to issue a Special Event Permit, all fees must be paid and all required insurance certificates and permits must be obtained and submitted.

Please answer all questions, printing clearly. Attach the mandatory parking plan and site plan that includes the layout of the event. Depending on the type of event, you may also need to complete additional attachments. Attach additional sheets as needed to clearly describe your event. Any misrepresentation of information in this application or deviation from the final permit conditions may result in the immediate revocation of the event permit.

This application will be distributed to Town departments that will be involved in permitting and/or supporting the event described in this application. The departments will review the application in order to determine required conditions, estimated cost of Town support services (if needed), and permits that will be required. As the applicant, you will be responsible for providing, prior to the event, any necessary insurance certificates and prepayment of fees for any Town services that will be required. After your event, you will be responsible for paying the Town for the actual cost of Town services.

Please complete and submit a special event permit application with all required attachments to:

**Town of Miami Lakes
Department of Planning, Zoning and Code Compliance
Town Hall
6601 Main Street
Room 105
Miami Lakes, Florida 33014
Phone: 305.364.6100
www.miamilakes-fl.gov**

Complete information regarding the Town Code and Ordinances is available at the Miami Lakes Town Hall or online at www.miamilakes-fl.gov.

1

Are you requesting a Town facility or park? ☐ yes ☐ no If no, proceed to Section 2.

If yes, what is the name and location of the facility or park? _____

If using a Town of Miami Lakes facility or park, please mark if you will need the following from the Parks Department:

☐ PA system ☐ Speakers ☐ Podium ☐ Electricity ☐ Staff ☐ Restrooms ☐ Other: _____

Will the event require closing a street? ☐ yes ☐ no ☐ yes, a request for a temporary road closing is required. The street closures must be approved by Miami-Dade Fire and Rescue, the Miami Lakes Police Department, Public Works Department and the Planning and Zoning Department. Please fill out Section 6.

2

Contact Information

Person or entity seeking the permit: _____

☐ For profit organization ☐ Non-profit organization, Tax exempt # _____

Does the person or entity have their occupational license? ☐ yes ☐ no

Authorized designee _____

Street address _____

City _____ State _____ Zip _____

Cell phone #: ____ - ____ - ____ Email address: _____

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Event coordinator: _____

Street address _____

City _____ State _____ Zip _____

Cell phone #: ____ - ____ - ____ Email address: _____

Event Information

Name of event: _____ Date of event: ____/____/____

Location of event: _____

Address of event _____

City _____ State _____ Zip _____

Property owner: _____ Phone #: ____-____-____

Street address _____

City _____ State _____ Zip _____

Event starting time: _____ Event ending time: _____

Is this an annual event? yes no Will admission be collected? yes no

Please mark the type of event this is:

Festival Parade Fair / carnival Private party Sports event Concert

Fundraiser Religious Community event Block party* Political Other

Setup date and time: _____ Breakdown date and time: _____

Is the event open to the public? yes no Will admission be collected? yes no

Please state the admission/ticket price: _____

* If ☐ the event is a block party signatures of approval from all surrounding homeowners must be presented. Approval will also be required from Miami-Dade County Fire and Rescue, Town of Miami Lakes Police Department, Public Works Department and the Planning and Zoning Department.

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Description of the event for which the permit is requested:

6

Road Closing Request (if applicable)

Proposed route map must be attached to the application.

Hours of road closure: _____

Reason for road closure: _____

Name(s) of street(s) to be closed:

A Maintenance of Traffic (MOT) plan must be submitted with the application. The Public Works Department/this section may be required to be signed by an authorized professional.

For Official Use Only

Approval by Miami-Dade Fire Department

7

Entertainment / Amplified Sound*

Will the event utilize music or amplified sound? ☐ yes ☐ no

What type of amplified sound will you be using? ☐ Live ☐ PA system ☐ Amplified sound/DJ

Hours of amplified sound: _____ **Is the event outdoors?** yes no

If applicable, please attach names and times of performers.

☐☐

8

Parking

Please describe your parking plan:

9

Security / Police / Fire

Plans for security: _____

Have you hired a licensed security company to manage this event? ☐ yes ☐ no

If yes, company name: _____ Phone #: _____ - _____ - _____

Please attach license of company.

Please check below, the activities that will take place during the event:

☐ Fireworks ☐ Open fire ☐ Gas for cooking ☐ Live animals ☐ Carnival rides

Are you requesting police presence? ☐ yes ☐ no If yes, you will be responsible for all related costs.

If yes, list number of officers requested, hours, location: _____

Have you hired licensed emergency medical services to manage the event? ☐ yes ☐ no

If yes, list company name, contact person, and phone number: _____

10

Food / Beverages

Will food or beverages be sold? ☐ yes ☐ no If yes, each vendor must obtain a permit from the Miami-Dade County Department of Environmental Health.

Will alcohol be sold? yes no If yes, contact Miami-Dade County to obtain an alcohol permit

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☐ ☐

11

Trash Removal / Cleanup ☐ ☐

Please describe your trash removal and cleanup plan. If necessary, please attach additional documentation: _____

Please list the name of the sanitation company you are working with: _____

Please list the number of trash cans and staff/volunteers you will have at the event: _____

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Building Department Permits

You are responsible for obtaining all permits required through the Town of Miami Lakes Building Department. Please mark where applicable.

	Yes/No	Description/Size/Number	Additional Information
Tents			A building permit is required if tent is larger than 10' x 10'. All tents must be approved by the Miami-Dade Fire Department
Staging			Building permit required
Portable toilets			Plumbing permit required
Water			Plumbing permit required
Electrical/generator			Electrical permit required
Fencing			Building permit required
Bleachers or risers			Building permit required
Other			

13**Insurance Information**

Please attach a current certificate of liability insurance. The Town of Miami Lakes requires that organizers of special events carry a general liability limit of no less than \$1,000,000 and if alcohol is served, a liquor liability of no less than \$1,000,000. Organizers must also provide a certificate of liability insurance naming the Town of Miami Lakes as an additional insured and must follow all rules and guidelines where necessary.

Coverage dates: _____

Insurance company: _____

Limits of liability: _____ **Agent:** _____

Agent's phone number: ____ - ____ - ____

Is the Town of Miami Lakes named as an additional insured on this policy? yes no

14**Signage* / Media**

Will you be using signage to advertise for this event? yes no

If yes, please check off what you plan on using:

Sandwich Boards **Location:** _____

Election Type Boards **Location:** _____

Pole Banners **Location:** _____

Flyers **Location:** _____

Other: _____ **Location:** _____

Person responsible for installing and removing all items:

INDEMNIFICATION:

For and in consideration of the Town of Miami Lakes consent to allow the applicant to hold a special event, parade, or public assembly within the limits of the Town of Miami Lakes, the applicant agrees to the following:

The permit applicant, jointly and severally, hereby holds harmless, indemnifies and defends the Town of Miami Lakes, its representatives, officers, agents, affiliates, employees, the administration, elected and appointed officials from and against all liability, suits, actions, claims, costs, expenses or demands (including, without limitation, suits, actions, claims, costs, expenses or demands resulting from death, personal injury and property damage) or expenses of every kind and character, including reasonable attorney's fees, costs and appeals, arising or resulting in whole or in part, as a result of any tort, intentional action, negligent acts, or omissions on the part of the applicant or any of the participants of the event outlined in this application. This indemnification shall survive the termination of this special event permit and shall be in full force and effect beyond the term or termination of this special event permit, however terminated. This indemnification provision includes claims made by the entitlement, if any, to immunity under Section 440.11 of the Florida Statutes. Nothing contained herein shall be construed as a waiver of any immunity or limitation of liability the Town may have under the doctrine of sovereign immunity of Section 768.28 of the Florida Statutes.

Signature of applicant or authorized agent: _____ Date: ____/____/____

Print name: _____ Title: _____

Street address: _____

City: _____ State: _____ Zip: _____ Phone #: ____-____-____

Notary Public State of Florida at Large

Application, comprehensive site plans, event publications, flyers, and certificates of liability insurance must accompany this application and must be submitted to:

Department of Planning, Zoning, and Code Compliance

Applicant Checklist

Have you...

- If applicable, attached a copy of tax ID number? ☐
- If applicable, attached approval for a road closing and MOT? ☐
- Attached a security plan? ☐
- Attached a certificate of insurance? ☐
- Attached a complete entertainment list and schedule? ☐
- Attached a parking plan? ☐
- If applicable, attached a medical plan? ☐
- Attached your description and site map for your event? ☐
- Attached your plan for trash removal and cleanup plan? ☐
- Applied for all permits:
 - Building ☐
 - Plumbing ☐
 - Electrical ☐
 - Food / Beverage ☐
 - Alcohol? ☐

OFFICE USE ONLY

Approval Signatures Required:

Jose Heredia
Zoning Official

Mike Mesa
Building Official

Ismael Diaz
CFO

Javier Ruiz
Town Police Commander, MDPD

Daniel Angel

Carlos Acosta

Director of Parks & Recreation

Public Works Director

Clarisell De Cardenas

**Communications & Community
Affairs**

Edward Pidermann

Town Manager